

UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

JEANETTE Y. SAMS))	
(Name of the plaintiff or plaintiffs)))) CIVIL ACTION)	
v.)) NO. 13 CV 7625	
CITY OF CHICAGO POLICE DEPT.		
BARBARA HEMMERLING))	
) MAR 1 2	2014
(Name of the defendant or defendants)) THOMAS G. CLERK, U.S. DIST	
AMENDED COMPLAINT OF EMPL	LOYMENT DISCRIMINATION	
1. This is an action for employment discrime	nination.	
2. The plaintiff is JEAN	NETTE Y. SAMS	_ of the
county of COOK		_ •
3. The defendant is CITY OF CHICAGO		_, whose
street address is3510 South Michigan Av	venue	_,
(city) Chicago (county) Cook	2222	
(Defendant's telephone number) (312)	_ 745-6100	
4. The plaintiff sought employment or was e	employed by the defendant at (street address	s) ·
3510 South Michigan Avenue	(city) Chicago	
(county) Cook (state) Ilinois	_(ZIP code) 60652	

5. Tł	ne plaint	iff [check one box]
(a)		was denied employment by the defendant.
(b)	X	was hired and is still employed by the defendant.
(c)		was employed but is no longer employed by the defendant.
		dant discriminated against the plaintiff on or about, or beginning on or about, MARCH, (day) 12, (year)
7. <u>1</u>	(Choose	paragraph 7.1 or 7.2, do not complete both.)
		(a) The defendant is not a federal governmental agency, and the plaintiff [check
		one box] $has not$ filed a charge or charges against the defendant X has
	_	cts of discrimination indicated in this complaint with any of the following
goven	nment ag	gencies:
	(i)	the United States Equal Employment Opportunity Commission, on or about
		(month) MARCH (day) 12 (year) 2012 .
	(ii)	the Illinois Department of Human Rights, on or about
		(month)(day)(year)
(b)	If charg	ges were filed with an agency indicated above, a copy of the charge is
attach	ed. X	YES. NO, but plaintiff will file a copy of the charge within 14 days.
It is th	e policy	of both the Equal Employment Opportunity Commission and the Illinois
Depar	tment of	Human Rights to cross-file with the other agency all charges received. The
plainti	iff has n	o reason to believe that this policy was not followed in this case.
7.2	The d	efendant is a federal governmental agency, and
1 .4.		plaintiff previously filed a Complaint of Employment Discrimination with the
		ant asserting the acts of discrimination indicated in this court complaint.
	actona	and asserting the acts of discrimination maleated in this court complaint.

			Yes (month)	(day)	(year)
			No, did not file Cor	nplaint of Employment	Discrimination
	(b)	-		ency Decision on (mont	h)
	(c)		year)s a copy of the		
		(i) Compl	aint of Employment I	Discrimination,	
		П	ES NO, but a	copy will be filed within	n 14 days.
		(ii) Final A	Agency Decision		
		□ Y	TES NO, but a	copy will be filed with	in 14 days.
8.	(Com	plete paragr	aph 8 only if defenda	nt is not a federal govern	nmental agency.)
	(a)	the U	nited States Equal Em	ployment Opportunity C	commission has not issued
		a Noti	ce of Right to Sue.		
	(b) X	the U	nited States Equal Em	ployment Opportunity C	Commission has issued a
				th was received by the p	
				y) 27 (year) 201	a copy of which
		Notice	e is attached to this co	mplaint.	
9.	The	defendant di	scriminated against th	e plaintiff because of the	e plaintiff's [check only
	those	that apply]	:		
	(a)	Age (Ag	e Discrimination Emp	oloyment Act).	
	(b)	Color (T	itle VII of the Civil R	ights Act of 1964 and 42	2 U.S.C. §1981).

	(c) X D	visability (Americans with Disabilities Act or Rehabilitation Act)
	(d) N	National Origin (Title VII of the Civil Rights Act of 1964 and 42 U.S.C. §1981).
	(e) R	ace (Title VII of the Civil Rights Act of 1964 and 42 U.S.C. §1981).
	(f) R	eligion (Title VII of the Civil Rights Act of 1964)
	(g) S	ex (Title VII of the Civil Rights Act of 1964)
10.	If the defe	endant is a state, county, municipal (city, town or village) or other local
	governme	ental agency, plaintiff further alleges discrimination on the basis of race, color,
	or nationa	al origin (42 U.S.C. § 1983).
11.	Jurisdiction	on over the statutory violation alleged is conferred as follows: for Title VII
	claims by	28 U.S.C.§1331, 28 U.S.C.§1343(a)(3), and 42 U.S.C.§2000e-5(f)(3); for
	42 U.S.C.	§1981 and §1983 by 42 U.S.C.§1988; for the A.D.E.A. by 42 U.S.C.§12117;
	for the Re	chabilitation Act, 29 U.S.C. § 791.
12.	The defen	adant [check only those that apply]
	(a)	failed to hire the plaintiff.
	(b)	terminated the plaintiff's employment.
	(c)	failed to promote the plaintiff.
	(d)	failed to reasonably accommodate the plaintiff's religion.
	(e) X	failed to reasonably accommodate the plaintiff's disabilities.
	(f)	failed to stop harassment;
	(g)	retaliated against the plaintiff because the plaintiff did something to assert rights protected by the laws identified in paragraphs 9 and 10 above;
	(h)X	other (specify): Placed on a Leave despite a medical letter stating ability to work
	therefor	e no medical coverage nor income as a form of punishment.

	Defe	fendant knowingly placed plaintiff at risk for further medical problems with				
	no income for daily needed life sustaining medicine, and the strong possibility					
	of a	major stroke causing death.				
13.	The fa	acts supporting the plaintiff's claim of discrimination are as follows:				
	S	SEE ATTACHED				
	•					
14.		DISCRIMINATION ONLY] Defendant knowingly, intentionally, and willfully minated against the plaintiff.				
15.	The pl	aintiff demands that the case be tried by a jury. X YES NO				
16.		EFORE, the plaintiff asks that the court grant the following relief to the plaintiff nly those that apply]				
(a)		Direct the defendant to hire the plaintiff.				
(b)		Direct the defendant to re-employ the plaintiff.				
(c)		Direct the defendant to promote the plaintiff.				
(d)		Direct the defendant to reasonably accommodate the plaintiff's religion.				
(e)		Direct the defendant to reasonably accommodate the plaintiff's disabilities.				
(f)	X	Direct the defendant to (specify): PAY ALL BACK PAY AND MAKE				
	МНОГ	E , FULL MEDICAL PENSION COVERAGE OR BENEFITS				

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(g) X	If available, grant the plaintiff appropriate injunctive relief, lost wages, liquidated/double damages, front pay, compensatory damages, punitive damages, prejudgment interest, post-judgment interest, and costs, including reasonable attorney fees and expert witness fees.
(h)X	Grant such other relief as the Court may find appropriate.
(Plaintiff	s signature)
(Plaintiff	's name)
JEANETT	E Y. SAMS
(Plaintifl	es street address)
7747 Sou	uth Paxton Avenue
(City) Chie	cago (State) Illinois (ZIP) 60652
	elephone number) (312) –213-8315
	Date: 24 October 2013

PARAGRAPH 13

RACE

In March 2011, I requested a transfer to the Medical Section Unit, within the CPD because I have the Education and skills to work within that unit. There were openings in that Unit at the time. Barbara Hemmerling refused to allow me to work in this Unit and told me she didn't want me there. She then proceeded to hire two white females who had less experience than I did. As a result of not being allowed to work in the Medical Unit, I was forced on leave and I did not receive any income or medical insurance while on leave.

DISABILITY

A failure to Accommodate and the discrimination issue. I am disabled in that I have suffered several strokes (CVA) and as a result I am permanently disabled. I am unable to work or live in a stressful environment, without a strong possibility of another stroke. I have weakness on the left side, leg and arm and other things. I requested an accommodation in that I work in the medical unit because there I would not work in a stressful environment and the medical unit was a less chaotic place with a one to one ratio. I was denied the accommodation despite my skills and training, and the fact that there were openings in the unit. As a result I was fraudulently placed on a personal leave then a medical leave where I received no pay and no medical coverage by Barbara Hemmerling.

Case: 1:13-cv-07625 Document #: 23 Filed: 03/12/14 Page 8 of 21 PageID #:76 Agency(ies) Charge No(s): EEOC Form 5 (11/09) Charge Presented To: CHARGE OF DISCRIMINATION **FEPA** This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form. 440-2012-02738 **EEOC** and EEOC Illinois Department Of Human Rights State or local Agency, if any Date of Birth Home Phone (Incl. Area Code) 08-15-1958 Name (indicate Mr., Ms., Mrs.) (773) 731-6948 Ms. Jeanette Y. Sams City. State and ZIP Code Street Address 7747 S. Paxton Ave., Chicago, IL 60649 Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.) Phone No. (Include Area Code) No Employees, Members (312) 745-5300 500 or More CHICAGO POLICE DEPARTMENT City. State and ZIP Code Street Address 3510 S. Michigan Ave., Chicago, IL 60652 Phone No. (Include Area Code) No Employees Members Name City, State and ZIP Code Street Address DATE(S) DISCRIMINATION TOOK PLACE DISCRIMINATION BASED ON (Check appropriate box(es).) Latest **Farliest** 03-12-2012 NATIONAL ORIGIN RELIGION SEX COLOR RACE GENETIC INFORMATION DISABILITY RETALIATION CONTINUING ACTION X OTHER (Specify) THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)) I began my employment with Respondent on or around January 30, 1991. I was employed as a Police Officer. During my employment, Respondent was aware of my disability. I requested a reasonable accommodation and it was not provided. In addition, I was subjected to different terms and conditions of employment, including, but not limited to, being placed on annual leave status without pay. On or around March 12, 2012, I was not allowed to return to work. I believe I have been discriminated because of my race, Black, in violation of Title VII of the Civil Rights Act of 1964, as amended. I also believe I have been discriminated against because of my disability, in violation of the Americans with Disabilities Act of 1990, as amended. MAR 2 3 2012 · ULLIUE NOTARY - When necessary for State and Local Agency Requirements I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their I swear or affirm that I have read the above charge and that it is true to procedures. the best of my knowledge, information and belief. I declare under penalty of perjury that the above is true and correct. SIGNATURE OF COMPLAINANT SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE (month, day, year)

Date

Case: 1:13-cv-07625 Document #: 23 Filed: 03/12/14 Page 9 of 21 PageID #:76

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION

EEOC Form 161 (
		DISMISSAL AND NOTICE O	F RIGHTS	
7747	otte Y. Sams S. Paxton Ave. ago, IL 60649	From	Chicago District Off 500 West Madison S Suite 2000 Chicago, IL 60661	ice it
	On behalf of person(s) CONFIDENTIAL (29 C	aggrieved whose identity is FR §1601.7(a))		
EEOC Charg	e No. EE	OC Representative		Telephone No.
		erry Zhang,		(312) 869-8029
440-2012-		vestigator	OMINO DE ACON.	(312) 003-0020
THE EEO	C IS CLOSING ITS FILE ON	THIS CHARGE FOR THE FOLL	_OWING REASON:	FOC
	The facts alleged in the charge	e fail to state a claim under any of th	e statutes emorced by the t	
	Your allegations did not involve	e a disability as defined by the Amer	ricans With Disabilities Act.	and the second s
	The Respondent employs less	than the required number of employ	yees or is not otherwise cov	vered by the statutes.
	discrimination to file your charge	filed with EEOC; in other words,		
X	information obtained establish the statutes. No finding is made	ng determination: Based upon its es violations of the statutes. This detast to any other issues that might	be construed as having be	en raised by this charge.
	The EEOC has adopted the fir	ndings of the state or local fair emplo	syment practices agency the	at investigated this charge.
	Other (briefly state)			
		- NOTICE OF SUIT RIG (See the additional information attache	HTS - d to this form.)	
You may fi	ation in Employment Act: T le a lawsuit against the respo set he filed WITHIN 90 DAYS	ies Act, the Genetic Information his will be the only notice of distribution (s) under federal law base of your receipt of this notice on a claim under state law may be	ed on this charge in feder e; or your right to sue bas	ral or state court. Your
alleged EP	Act (EPA): EPA suits must lead underpayment. This mean unfile suit may not be collect	be filed in federal or state court was that backpay due for any violable.	vithin 2 years (3 years for ations that occurred <u>me</u>	willful violations) of the ore than 2 years (3 years)
		On behalf of the C	ommission	- / /
		John P. N	acu	7/24/2013
Enclosures(s)	John P. Rowe, District Director		(Date Mailed)
C	tephen Patton, Esq. hief Assist. ITY OF CHICAGO DEPT OF	LAW		

30 North LaSalle St. Room 1040 Chicago, IL 60602



Dear City of Chicago Employee;

The Comptroller's Office has received the enclosed Court Ordered garnishment today. According to Federal and State regulations, as your employer, we must deduct the amount cited in the Court Order beginning with your next paycheck. These deductions can only be terminated when you reach the goal amount on the Order or, when we received a release from the Creditor.

If you would like to make alternate arrangements for payment and not have this money deducted from your paycheck or reduce the amount deducted from your paycheck each pay period, please contact the Creditor on the order and speak with one of their representatives.

Respectfully,

Garnishment Division
Office of the City Comptroller
33 N. LaSalle Street – Suite 700
Chicago, Illinois 60602
312-744-4463

Citation to Discover Assets to Third Party (Wages)

(Rev. 6/30/08) CCM 0638

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS FIRST MUNICIPAL DISTRICT

DISCOVER BANK Plaintiff(s).

VS.

JEANETTE Y SAMS Defendant(s). Court Date: 11/01/2013

No. 09 M2 3782

Defendant's Social Security Number

And

CITY OF CHICAGO
Third Party Respondent.

CITATION TO DISCOVER ASSETS TO THIRD PARTY (WAGES)

To: CITY OF CHICAGO, C/O COMPTROLLER'S OFFICE 33 N LASALLE ST, STE. 700 CHICAGO CHICAGO, 1

YOU ARE REQUIRED to appear or file your answer to this Citation on the form appearing on the reverse side or attached on November 1, 2013 before 9:30 a.m. in Courtroom 1401 located at Cook County Circuit Co 50 W. Washington, Chicago, Illinois. Judgment was entered on 10/08/10 in favor of Plaintiff DISCOVER BANK and against Defendant(s) JEANETTE Y SAMS in this Court under the above case in the sum of \$9,041.91. There is now due, less credit and off-set, the sum of \$11,532.75. Further sums may become due as cost and interest acc

YOU ARE TO INFORM the court of property and wages and other money you may hold belonging to Defendant JEANETTE Y SAMS or to which s/he may be entitled or which may thereafter be acquired by or become due to him o her.

YOU ARE PROHIBITED from making or allowing any transfer or other disposition of, or interfering with, any proper not exempt from execution or garnishment belonging to Defendant or to which s/he may be entitled or which may thereafter be acquired by or become due to him or her, and from paying over or otherwise disposing of any money not exempt which are due or to become due to Defendant, up to double the amount of the balance due, until further order court or termination of the proceeding, whichever occurs first.

THE COURT MAY PUNISH YOU if you violate the restraining provision of this citation as and for contempt, and the court may enter judgment against you for either the amount of the unpaid portion of the judgment and costs allowable under this section or the amount of the value of the property transferred, whichever is less. 735 ILCS 5/2-1402(f)(1). Failure to answer this Citation may result in entry of judgment against you for the balance due. 735 ILCS 5/2-1402(c)(4) 735 ILCS 5/12-807(a).

WARNING: YOUR FAILURE TO APPEAR OR FILE AN ANSWER IN COURT AS HEREIN DIRECTED MAY CAUSE YOU'BE ARRESTED AND BROUGHT BEFORE THE COURT TO ANSWER TO THE CHARGE OF CONTEMPT OF COURT, WHICH MAY BE PUNISHABLE BY IMPRISONMENT IN THE COUNTY JAIL.

CERTIFICATE BY JUDGMENT CREDITOR OR ATTORNEY FOR JUDGMENT CREDITOR

Under penalties as provided by law pursuant to Section 1-109 of the Code of Civil Procedure (735 ILCS 5/1-109), the undersigned certifies that the above information regarding the amount of the judgment, the date of the judgment, or its revival date, the balance due thereon, the name of the Court and the number of the case is true and correct.

Attv. No. 44826

Name: ZWICKER & ASSOCIATES, P.C.

Signature:

A Law Firm Engaged in Debt Collection Address: 7366 N. LINCOLN AVE. SUITE 102 City/State/Zip: LINCOLNWOOD, IL 60712 Telephone: (847)677-7410 FAX: (847)677-7415

DOROTHY BROWN, CLERK OF THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS

314253

(6/30/08)

CCM 0124 B

ANSWER OF THIRD PARTY RESPONDENT CITATION

This first section must be filled out by the judgment creditor.

Citation/Respondent: JP MORGAN CHASE BANK

Defendant's Name: JEANETTE SAMS

Plaintiff: Cavalry SPV II, LLC

Court Date: Case No.: 13-M1-138643

Judgment Balance: \$3,567.95

This is a Citation: Freeze up to double the Judgment Balance

INTERROGATORIES

1. On the date of service of the citation, did you have in your possession, custody or control any personal property or monies belonging to the judgment debtor? □ Yes □ No

IF THE ANSWER IS YES GO TO NEXT QUESTION. IF NO GO TO INSTRUCTIONS.

2. Is this an IRA account? Or have all of the deposits made during the past 90 days been electronically deposited and identified as exempt Social Security, Unemployment Compensation, Public Assistance, Veteran's Benefits, Pension or Retirement or by a source drawing from any other statutory exemptions? ☐ Yes ☐ No

IF THE ANSWER IS YES GO TO NEXT QUESTION. IF NO GO TO INSTRUCTIONS.

3. Is/Are the account(s)' current balance equal to or less than the total of the exempt deposits?

Yes
No

NOT FREEZE

TO VOIL ANGUEDED VES TO ALL 3 OUTESTIONS AND FUNDS IN THE ACCOUNT(S) ARE EXEMPT, DO NOT FREEZE

1.1	QUESTIONS AND FUNDS IN THE ACCO HE FUNDS AND GO TO INSTRUCTIONS E ACCOUNT BALANCE	AMOUNT WITHHELD
	\$\$	
) Savings Account	\$\$	
) Check/MMA/Now Account	ss	
) Certificate of Deposit	\$\$	
) Trust Account/Other	\$	
Describe)		
i) Safety Deposit 🗆 Yes 🗆 No		
) Land Trust No		s
3) Less Right of Offset for Loans	TO A STANFALL TO	
	TOTAL AMOUNT FROZEN:	3
i. List all electronic deposits into account(s) and their source(s) except deposits:	
Account Number Source	IVIOL	thly Amount
	\$	
6. List all joint account holders or adverse	claimants:	
o. List an joint account notes of the	Name	NameAddress
NameAddress	NameAddress	
To Checking C CD Savings	Account Type: Checking CD Savings	Account Type: Checking CD Savings
Account Type: Checking 65 Strongs	Account Number	☐ Account Number
	Maincom	
(3.) Fax or mail a copy of this Aliswer to	i) the Court, (ii) Plaintiff's attorney and (iii) It is mail to the Clerk of the Court, Richard J. Do to Plaintiff's attorney at (847) 241-1220 of the py fax or mail instructing you how to proceed the court of the	ley Center, 50 W. Washington Sueet, Room 602
(4.) You will receive a copy of a Court Of	CERTIFICATION	descioned certifies that the statements set forth in this
Under the penalties as provided by law pursuant tinstrument are true and correct and that I have me	CERTIFICATION o Section 1-109 of the Code of Civil Procedure, the united this Answer to Defendant(s).	Herbikuse collinos mus ma amanas
Date'	Print Agent Name:	
L/1614.	Signature of Agent:	
Respondent Name:		
Respondent Name:		

Case: 1:13-cv-07625 Document #: 23 Filed: 03/12/14 Page 13 of 21 PageID #:76 Seal of Court Clerk of the Court 3 Court Date: 11/01 Employer/Agent: CITY OF CHICAGO Case No.:09 M2 3782 S.S. No. Defendant's Name: JEANETTE Y SAMS Defendant's Address: 7747 S PAXTON AVE CHICAGO, IL 60649 CERTIFICATION OF MAILING BY JUDGMENT CREDITOR OR ATTORNEY FOR JUDGMENT CREDITO Under penalties as provided by law pursuant to Section 1-109 of the Code of Civil Procedure (735 ILCS 5/1-109), I cer that I mailed by regular first-class mail a copy of the citation to Defendant at the address shown above on 10/11/2 Name: Aaron Weiss Signature: INTERROGATORIES/ANSWER TO THIRD FARTY CITATION TO DISCOVER ASSETS (WAGES) Do you pay any money to the Defendant listed above? Yes No II terminated, date IF YOUR ANSWER IS "NO." GO TO "RESPONDENT CERTIFICATION" Of the funds paid to the debtor, are any of those funds: Subject to prior court ordered deduction (including child/spouse support) Case Number, State, Country Otherwise exempt? (Describe Retirement? Disability? CALCULATION TO DETERMINE AMOUNT OF WITHHOLDING (Note: If income varies, withholding must be recalculated for every pay period.) Every two weeks Semi-monthly Monthly Do you pay debtor: Every week Gross wages per paycheck minus mandatory contributions to pensions or retirement plan (A) **(B) (B)** 15% of (A) =Enter total FICA, State Tax, Federal Tax and Medicare **(C)** (C) Subtract (C) from (A) =**(D)** If debtor is paid every week, enter \$371.25 **(E)** If debtor is paid every two weeks, enter \$742.50 If debtor is paid semi-monthly, enter \$804.37 If debtor is paid monthly, enter \$1,608.75 If other, multiply 45 times state minimum wage (currently \$8.25) times number of weeks in pay period Subtract (E) from (D) (Enclose a negative number in parentheses, e.g., (\$50.00)) **(F)** IF LINE "F" IS ZERO OR A NEGATIVE NUMBER, DO NOT WITHHOLD ANY WAGES. GO TO "INSTRUCTIONS" BELOW. (G) Enter the Lesser of Line (B) or (F) (G) Enter Child Support or other Court Ordered Deduction (\mathbf{H}) Subtract (H) from (G) (Enclose a negative number in parentheses, e.g., (\$50.00)) **(I)** LINE "I" MUST BE WITHHELD AS OF THE DATE OF SERVICE AND HELD UNTIL FURTHER COURT ORDER. IF LINE "I" IS ZERO OR A NEGATIVE NUMBER, DO NOT WITHHOLD ANY WAGES. GO TO "INSTRUCTIONS" BELOW. Subtract Employer's Statutory Fee (2% of line "I"). See 735 ILCS 5/12-814. **(J)** Amount to be applied to Judgment (K) INSTRUCTIONS 1. Complete the Interrogatories/Answer to the Third Party Citation to Discover Assets (Wages). 2. Complete and sign the certification at the bottom of this page. 3. Fax or mail a copy of this Answer to the Court and Plaintiff's attorney and give a copy to the Defendant. If filing in the First Municipal District, either fax it to (312) 603-6522 or mail to the Clerk of Court, Richard J. Daley Center, 50 West Washington Stre Room 602, Chicago, IL 60602. To assure timely processing, the Answer should be received at least three days before the Court Date 4. You will receive a copy by fax or mail of a Court Order instructing you how to proceed and where to send any withheld funds. RESPONDENT CERTIFICATION Under the penalties as provided by law pursuant to Section 1-109 of the Code of Civil Procedure (735 ILCS 5/1-109), the undersigned certifies that the statements set forth in this instrument are true and correct and that I have eithe mailed or hand delivered a copy of this completed Interrogatories/Answer to the Defendant. 10 City of Chicago Garnishment Unit

Signature of Employer/Agent

Print full name clearly:

33 N. LaSalle St. · Rm 700

Chicago, IL 60602



The Shindler Law Firm

1990 E Algonquin Rd. Suite 180 Schaumburg, IL 60173 Phone: (847) 537-1000 Fax: (847) 537-0959

01/03/2014

JEANETTE SAMS 7747 S PAXTON AVE CHICAGO, IL 60649-4113

Re:

Cavalry SPV II, LLC, -VS. - JEANETTE SAMS

Our File #:

314253

Case #:

13-M1-138643

Enclosed please find a Third Party Citation which was filed in court.

THIS IS AN ATTEMPT TO COLLECT DEBT AND ANY INFORMATION OBTAINED WILL BE USED FOR THAT PURPOSE

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS MUNICIPAL DEPARTMENT, FIRST DISTRICT		
Cavalry SPV II, LLC, Plaintiff, v.) No. 13-M1-138643	
JEANETTE SAMS)) ** THIS IS AN ATTEMPT TO COLLECT A) DEBT AND ANY INFORMATION OBTAINED) WILL BE USED FOR THAT PURPOSE**	
Defendant,	,	
JP MORGAN CHASE BANK Third Party Respondent,) RETURN DATE:at 9:30 a.m.	

Judgment Debtor's last known:

Name: JEANETTE SAMS Address: 7747 S PAXTON AVE City: CHICAGO, IL 60649-4113

Phone:

A judgment in favor of Cavalry SPV II, LLC and against JEANETTE SAMS was entered on 08/26/2013 in the amount of \$3,219.04 plus costs and \$3,567.95 remains unsatisfied

Name and address of Attorney for Judgment Creditor:

Attorney No.: 27053 The Shindler Law Firm 1990 E, Algonquin Rd. Ste. 180 Schaumburg, IL 60173 (847) 537-1000

Name of person receiving citation: JP MORGAN CHASE BANK

NOTICE: The court has issued a citation against the person named above. The citation directs that person to appear in court to be examined for the purpose of allowing the judgment creditor to discover income and assets belonging to the judgment debtor or in which the judgment debtor has an interest. The citation was issued on the basis of a judgment against the judgment debtor in favor of the judgment creditor in the amount stated above. On or after the court date stated above, the court may compel the application of any discovered income or assets toward payment on the judgment.

The amount of income or assets that may be applied toward the judgment is limited by federal and Illinois law. THE JUDGMENT DEBTOR HAS THE RIGHT TO ASSERT STATUTORY EXEMPTIONS AGAINST CERTAIN INCOME OR ASSETS OF THE JUDGMENT DEBTOR WHICH MAY NOT BE USED TO SATISFY THE JUDGMENT IN THE AMOUNT STATED ABOVE:

314253	(Rev. 6/30/08) CCM 0124 A
Citation to Discover Assets to a Third Party	(164.000.00)
IN THE CIRCUIT OF MUNICIPAL	COURT OF COOK COUNTY, ILLINOIS DEPARTMENT, FIRST DISTRICT
Cavalry SPV II, LLC, Plaintiff,)) No. 13-M1-138643
v.)
JEANETTE SAMS	** THIS IS AN ATTEMPT TO COLLECT A DEBT AND ANY INFORMATION OBTAINED WILL BE USED FOR THAT PURPOSE**
Defendant, JP MORGAN CHASE BANK Third Party Respondent,) RETURN DATE:
CITATION TO DIS	SCOVER ASSETS TO A THIRD PARTY ONE OF THE STATE
	ATIMIC VCI RMS AUX S. LAGALLEL DOLLE DOLLE
YOU ARE REQUIRED to either file your answer to this Cita in Courtroom 1401 of the Richard J. Daley Center, 50 W. Wa Plaintiff, Cavalry SPV II, LLC and against, Defendant, JEAN plus costs. There is now due, less credits and off-set, sum of accrues.	ation on the form attached hereto or appear on
Your answer will inform the Court as to property you may ho	old belonging to JEANETTE SAMS (Judgment Deotor).
enforcement of a judgment, a deduction order or garmsmillen	sfer or other disposition of, or interfering with, any property not exempt from the t, property belonging to the judgment debtor or to which s/he may be entitled or which and from paying over or otherwise disposing of any moneys not so exempt, which are effect until further order of court or termination of the proceeding. You are not required mount of the total sum due the judgment creditor.
If the account consists solely of funds that can be identified a ACCOUNT and YOU MUST RESPOND that the account column include Social Security, SSI, veteran's benefits, Railroad and/or circuit breaker property tax relief benefits.	as exempt under federal or state law, you are PROHIBITED from FREEZING THE onsists solely of exempt funds. Deposited funds that are exempt under federal and state if Retirement benefits, public assistance benefits, unemployment compensation benefits
ENTERED AGAINST YOU FOR THE UNSALISHED	HE CITATION PROCEEDING MAY RESULT IN A JUDGMENT BEING AMOUNT IF THIS JUDGMENT. 735 ILCS 5/2-1402(1) (1).
WARNING: IF YOU FAIL TO APPEAR IN COURT OF BROUGHT BEFORE THE COURT TO ANSWER TO	R FILE YOUR ANSWER AS DIRECTED, YOU MAY BE ARRESTED AND A CHARGE OF CONTEMPT OF COURT, WHICH MAY BE PUNISHABLE BY
CERTIFICATION BY JUDG!	MENT OR ATTORNEY FOR JUDGMENT CREDITOR Section 1-109 of the Code of Civil Procedure (735 ILCS 5/1-109), the undersigned ent Amount of \$3,219.0 plus costs, Balance Due Creditor: \$3,567.95, ourt of Cook County 13-M1-138643 is true and correct.
Attorney for Plaintiff The Shindler Law Firm Keith S. Shindler ARDC 6202882 Michael R. Joyce ARDC 6298460 Antonio C. Capozzi ARDC 6291445 Anthony Frank ARDC 6305951 1990 E. Algonquin Rd. Ste. 180 Schaumburg, IL 60173 Telephone: (847) 537-1000; FAX: (847) 241-1220	Signature: ATTORNEY FOR PLAINTIFF
Clerk of Court	Seal of Court

DOROTHY BROWN COUNTY, ILLINOIS



- (1) Under Illinois or federal law, the exemptions of personal property owned by the debtor include the debtor's equity interest, not to exceed \$4,000.00 in value, in any personal property as chosen by the debtor, including money in a bank account.
- (2) Social Security and SSI benefits;
- (3) Public assistance benefits:
- (4) Unemployment compensation benefits;
- (5) Worker's compensation benefits;
- (6) Veteran's benefits;
- (7) Circuit breaker property tax relief benefits;
- (8) The debtor's equity interest, not to exceed \$2,400 in value, in any one motor vehicle;
- (9) The debtor's equity interest not to exceed \$1,500 in value, in any implements professional books, or tools of the trade of the debtor; (10) Under Illinois law every person is entitled to an estate in homestead, when it is owned and occupied as a residence, to the extent
- in value of \$15,000, which homestead is exempt from judgment;
- (11) Under Illinois law, the amount of wages that may be applied toward a judgment is limited to the lesser of (i) 15% of gross weekly wages or (ii) the amount by which disposable earnings for a week exceed the total of 45 times the federal minimum hourly wage;
- (12) Under federal law, the amount of wages that may be applied toward a judgment is limited to the lesser of (i) 25% of disposable earnings for a week or (ii) the amount by which disposable earnings exceed 30 times the federal minimum hourly wage;
- (13) Pension and retirement benefits (including IRA accounts) and refunds may be claimed as exempt under Illinois Law.

The judgment debtor may have other possible exemptions under the law.

THE JUDGMENT DEBTOR HAS THE RIGHT AT THE CITATION HEARING TO DECLARE EXEMPT CERTAIN INCOME OR ASSETS OR BOTH. The judgment debtor also has the right to seek a declaration at an earlier date, by notifying the clerk in writing at the office of the Clerk of Circuit Court in room 601, 50 W. Washington St., Chicago, IL 60602. When so notified, the Clerk of the Circuit Court will obtain a prompt hearing date from the court and will provide a hearing date and the necessary forms that must be prepared by the judgment debtor or the attorney for the judgment debtor and sent to the judgment creditor or the judgment creditor's attorney by regular first class mail, regarding the time and location of the hearing.

This notice may sent to the judgment debtor by regular first class mail.

CERTIFICATION OF MAILING Under penalties as provided by law pursuant to Section 1-1 certifies that s/he mailed by regular first-class mail a copy below upon filing of the citation or within three business d	BY ATTORNEY FOR JUDGMENT CREDITOR 09 of the Code of Civil Procedure (735 ILCS 5/1-109), the undersigned of the citation notice and this citation to defendant at the address shown ays of service if served upon Third Party Respondent.
Signature:	Name: Michael R. Joyce Astopho Caponio Keith S Shindler Anthony Frank
# 27053 The Shindler Law Firm Attorney for Plaintiff 1990 E. Algonquin Rd. Ste. 180 Schaumburg, IL 60173 Telephone: (847) 537-1000 FAX: (847) 241-1220 DOROTHY BROWN, CLERK OF TI	Preparer's Signature HE CIRCUIT COURT OF COOK COUNTY, ILLINOIS

Human Resources Division Medical Services Section 24 December 2010

TO:

Tracey R. Ladner

Director

Human Resources Division

FROM:

William R. Looney

Inspector/Commanding Officer Medical Services Section

SUBJECT:

Reinstatement Process, Medical Clearance:

Sams, Jeanette Y. LOA: 14 Jul 2006

Rank: Police Officer Employee #: 30860

Star #: N/A

Pursuant to your request, the above-named Officer was provided with a physical examination on 15 Nov 10 based on her application for Reinstatement from a Leave of Absence-Personal Disability. The medical evaluation disclosed that the Officer is qualified to return to Convalescent Duty status. However, the Officer's eligibility status has not been verified by the Internal Affairs Division or the Human Resources Division. Furthermore, Range Qualification has not been scheduled by the Medical Services Section.

William R. Looney
Inspector/Commanding Officer
Medical Services Section

CC:

Howard W. Lodding

Assistant Deputy Superintendent Education and Training Division

Virginia Garcia

Manager of Police Personnel

John J. Gallagher, Jr. Executive Director

Policeman's Annuity and Benefit Fund

RECEIVED

DEC 29 2010

MUMAN ACTOR : SERVICES

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Chicago Police Department

Date: 7/23/10

Medical Services Section 3510 S. Michigan Avenue Chicago, IL, 60653

Alln Nurse: Beverly Holowach Contact Number: 312 745-5114 Fax Number: 312-745-6707

	Fax Number: 312-	745-6707		
D	ear Doctor,			
т	he below listed Chicago Police Officer is currentl	y under your care for a sig	ckness or injury.	
Officer			Employee#	
	JEANETTE SAINS	; ·/·	accommodate an Officer with certain	in
medical i	The Chicago Police Department promotes a timel imitations. A Chicago Police Officer can return to	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	The Officer can safely carry, handle and us	e his/her Department appartion course, if applicable	proved prescribed firearm (pending).	
:	 Maintain an independent and stable gait we crutches, canes, walkers, wheelchairs etc.). So other orthopedic devices (braces, open toe wa 	ithout the assistance of e	xternal ambulatory support devices	(e.g., i or te.
	Based on your	current evaluation of t	he Officer	. A .
	> This Officer meets the above criteria and	eturn to full duty.	Yes No	
	> This Officer meets the above criteria but i	as medical limitations.	Yes No	e d
	Projected duration of medical limitation(s Please list the medical limitation(s) that m		work in a limited duty capacity:	
	I do to sentino harras	ute with in	terminant signals	ry-
	The state of the state of	Clarity area	de to navitain	ab
	strong gave white	ne ossition)	12 李 茂 文
	This Officer cannot meet the above criteria at t		· · · · · · · · · · · · · · · · · · ·	No
	Projected duration of this No-Work statu Please list the reason(s) the Officer cann			
	CHRISTIAN COMMUNITY	4.		e jek Tyr
•	HEALTH CENTER		A STATE OF THE STA	
. .	9718 South Halsted Street		The Country of the Co	
#	Chicago, IL 60628 773-233-4100			3
	773-233-8542 Fax Deborah Killingsworth, M.D.			
	M.D. Signature	our Kulese	1 2/23/10 DEC 08	3 2010
	Date: Debora	Killingsworth, M.D.		, ,
		rke sots	VI7/10 02:28 PM P3	TT



November 15, 2010

Chicago Police Department Medical Services Attn: Beverly Holowach, R.N. 3570 South Michigan Avenue Chicago, IL 60653

Re: Jeanette Sams

Dear Ms. Holowach:

We performed a Reinstatement physical examination of Jeanette Sams (8/15/1958) on November 15, 2010. The results of the medical examination have been reviewed. The examination included:

Physical Examination by a Physician Health History
Body Fat Composition
Chemistry Screen Panel
Serum HCG
Rubella Screen
Urinalysis
Complete Vision Testing
Tonometry Testing
Chest X-ray-PA & Lateral
Pulmonary Function Testing
Audiogram
12-lead Electrocardiogram

Some results of the examination, on the date tested above, were outside normal limits in the following areas:

Ms. Sams' spirometry reveals a moderate restrictive pattern. Full pulmonary function tests are recommended. An exercise stress test was not performed in my office. Ms. Sams is only able to undergo pharmacological stress tests. Her last documented adenosine stress test and myocardial perfusion study, dated 7/14/2009, is a normal study. Ms. Sams is found to have a significantly elevated serum LDL and total cholesterol. She has a slightly elevated serum LDH. She has immunity to Hepatitis B and Rubella. The Hepatitis C antibody is nonreactive. She has bloodtype O positive.

These deviations from normal limits do not relate to conditions that might place Ms. Sams at a health or safety risk associated with her employment. Ms. Sams may work full duty, but she should review these results with her physician or with our providers.

Sincerely,

Fernando Manalac, M.D.

Bellwood Clinic: 2615 W. Harrison • Bellwood, IL 60104 • 708-493-0299 • Fax: 708-493-0594 Chicago Clinic: 614 W. Monroe • Chicago, IL 60661 • 312-258-0700 • Fax: 312-258-0705 O'Hare Clinic: 4200 N. Mannheim • Schiller Park, IL 60176 • 847-801-5170 • Fax: 847-801-5176

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CHRISTIAN

CHRISTIAN
COMMUNITY
HEALTH
CENTER

Date: 2/22/11

CERTIFICATE TO RETURN TO WORK/SCHOOL

Name: Jeanette Sams
Was seen in my office on
Was under my care from to
Will be able to return to work/school on
Restrictions Light Work
Comments Pt may return to work a restriction
as premouly recommended
Diagnosis: Headricher Jp fall injury
Follow-Up Visit Date: I weeks Jime: per scheduling
Dr. KILLINGSWORTH Signature: School Mylysuguful

CHRISTIAN COMMUNITY

HEALTH CENTER

9718 South Halsted Street

Chicago, IL 60628

773-233-4100

773-233-8542 Fax

Deborah Killingsworth, M.D.

Phone (773)233-4100

Fax (773)233-8542